	PATENT A	APPLICATIO Effect	RD	09 728020										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								ALL EN		OR	OTHER SMALL			
TOTAL CLAIMS			14					RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		84	ASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			14 minus 20=		. 0			X\$ 9=		OR	X\$18=	·		
INDEPENDENT CLAIMS			Z minus 3 =		0			X40=	_	OR	X80≑			
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					<b>-135</b> =			+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2								OTAL	355	OR OR	TOTAL			
CLAIMS AS AMENDED - PART II								VIAL.	ددر		OTHER	THAN		
	(Column 1) (Column 2) (Column 3)						s	MALL		OR	SMALL	NTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	· 14	Minus	<u> l</u>	4	=	;	X\$ 9=		OB.	X818=			
AME	Independent	• 2	Minus	*** 0		=		X40=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>\</b>	135=		OR	+270=			
							<u> </u>	TOTAL		OR	TOTAL ADDIT. FEE			
		(Column 1)		(Colu	mn 2)	(Column 3)	AD	DIT. FEE			ADDIT: I EE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=	:	X\$ 9=		OR	X\$18=			
	Independent	NITATION OF M	Minus	ENDEN	CLAIM	-	İΓ	X40=		OR	X80=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							•	<b>⊦135</b> =		OR	+270=			
							AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	••		=	;	X\$ 9=		OR	X\$18=			
	Independent	NITATION OF 14	Minus	ENDEN	T CL AIRA	-		X40=		OR	X80=			
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-135=		OR	+270=			
										OR	TOTAL			
***	If the "Highest Nu	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 8/00)

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